



ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
SOLID WASTE SECTION - PROGRAM DEVELOPMENT & RECYCLING UNIT
3033 North Central Phoenix, Arizona 85012

SPECIAL WASTE MANIFEST

031991

GENERATOR	1. Generator's AZ ID No.	EXEMPT				2. Emergency Response Notification Phone Number	(800) 535-5053			
	3. Generator's Name and Mailing Address BOEING REALTY CORP. 4060 LAKEWOOD BLVD. LONG BEACH, CA. 90808 Generator's Phone Number and Area Code (310) 627-3014					SITE: 1414 DENKER ST. TORRANCE, CA.				
	4. Transporter 1 Company Name and Mailing Address BDC SWS 766 S. AYOJA AV. AZUSA CA 91702					Transporter's AZ ID No.				
						Transporter's Phone No.				
	5. Transporter 2 Company Name and Mailing Address					Transporter's AZ ID No.				
						Transporter's Phone No.				
	6. Primary Receiving Facility Name and Address (physical site location, if different) COPPER MOUNTAIN LANDFILL AVENUE 35E, COUNTY 12TH ST. YUMA, AZ. 85356					Facility's AZ ID No. 301428				
						Facility's Phone No. (520) 782-6355				
	7. Alternate Receiving Facility Name and Address (physical site location, if different)					Facility's AZ ID No.				
						Facility's Phone No.				
GENERATOR	8. U.S. DOT description, (if applicable)(Non-DOT regulated materials enter shipping name, physical state and description of all contents of waste).					Mark "X" if Haz. Mat.	Containers No.	Total Quantity	Unit Wt/Vol	
	NON RCRA HAZARDOUS WASTE SOLID (SOIL CONTAMINATED WITH METALS)						1	18	CY	
GENERATOR	9. Additional information on transportation, treatment, storage, or disposal WEAR PROPER PROTECTIVE EQUIPMENT. PROFILE # 12660									
	10. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and governmental regulations.									
	Printed/Typed Name S. M. Stavale					Signature [Signature]		MO DAY YR 10 8 97		
TRANSPORTER	11. Transporter 1 Acknowledgement of Receipt of Materials									
	Printed/Typed Name K. ROBINSON					Signature [Signature]		MO DAY YR 10 10 97		
	12. Transporter 2 Acknowledgement of Receipt of Materials									
	Printed/Typed Name					Signature		MO DAY YR		
FACILITY	13. Discrepancy Indication Space AZ Non Haz									
	14. Facility Owner or Operator: Certification of receipt of special waste materials covered by this manifest except as noted in above item.									
	Printed/Typed Name SHARON ROBERSON					Signature [Signature]		MO DAY YR 10 10 97		